

Assessment Strategy for Beauty and Spa Therapy NVQs and SVQs

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FOREWORD

We have the best standards for beauty and spa in the world. It is our vision that anyone achieving an NVQ/SVQ beauty or spa can take up employment in any country without having to take that country's national qualification.

Yet standards are only part of the equation of global acceptance of UK beauty and spa qualifications. Assessment is the key. Without some valid measure of achievement, the world's best standards are no more than words on paper.

This Assessment Strategy is based on solid research with the beauty therapy and spa industries, trainees, students, assessment centres and the inspectors of government funded programmes during 2002 and subsequent work in 2006 and 2008. It has high levels of support from all these stakeholders and has been agreed with all Awarding Bodies. It will continue to strengthen assessment and verification of NVQs and SVQs in beauty therapy and spa therapy. The aim is to standardise the assessment approach without losing the independence of each Awarding Body. This will lead to greater consistency within and between Awarding Bodies.

Continuing professional development is an important part of the Assessment Strategy because in industries where fashions, products, techniques and equipment change so rapidly, it is essential that everyone keeps their skills and knowledge upto-date to meet client needs. This is even truer for assessors and verifiers because they are the gatekeepers of standards for the next generation of beauty and spa therapists.

We sincerely hope that the good practice set in the Assessment Strategy will be applied not just to NVQs and SVQs but to all qualifications within the beauty and spa therapy industries.

Alan Goldsbro Chief Executive

Habia





ACKNOWLEDGEMENTS

Habia wishes to acknowledge the many people who have contributed to the development of this Assessment Strategy.

The level of dedication to the beauty and spa therapy industries is highly commendable.

Our particular thanks go to the expert working groups, dozens of training providers, employers and candidates and the staff of our Awarding Bodies who gave freely of their time to review and comment upon the various drafts of this document during the course of its development. Your feedback has been extremely important not only in shaping the final version of this document but also in providing Habia with information to assist our future work.

Our thanks also go out to all those who so willingly gave either their own time and effort or that of their staff to serve on our industry forums concerned with steering this project.

The endeavours of Habia staff and our external consultant deserve a special mention and our sincere thanks.





STATEMENT OF SUPPORT

This strategy has been developed as part of Habia's commitment to ensuring continuous improvement in training provision, expertise and the general quality of beauty and spa therapy services throughout the United Kingdom.

With effective implementation by our Awarding Bodies, it will support the continued availability of high quality National Vocational Qualifications (NVQs) and Scottish Vocational Qualifications (SVQs) that are fit for purpose and command wide public and employer confidence.

This strategy puts in place requirements which ensure the rigour and consistency of assessment procedures in addition to ensuring that all those involved in assessment processes remain highly qualified, experienced and technically up-to-date.

We have, therefore, no hesitation in recommending this strategy and the contribution it makes towards achieving our wider organisation goals for the beauty and spa therapy sectors and our responsibilities as a Standards Setting Body.

Alan Goldsbro

Chief Executive Officer

Habia





PART 2

MANDATORY REQUIREMENTS



Key Mandatory Components of Our Assessment Strategy

Part 2 sets out the Key Mandatory components of our Assessment Strategy for NVQs and SVQs, which are:

- performance in the workplace, the use of realistic working environments, requirements for a realistic working environment and the use of specific simulated activities
- Habia's approach to External Quality Control of Assessment
- the requirements for the occupational expertise of External Verifiers, Internal Verifiers and Assessors

Each of the above is expanded in more detail below.

Performance in the Workplace and Use of Simulations

The beauty therapy and spa therapy NVQs/SVQs may be assessed in the workplace and/or an approved 'realistic working environment' meeting the criteria set out in Appendix 1A.

Habia wishes to make clear its stance on the use of simulated activities and a realistic working environment. The key criterion for allowing the use of simulated activities in the assessment of performance is the rarity of the opportunity to undertake the activities required by the standard of competence. Examples of these activities include:

- dealing with fire and other emergencies
- dealing with health and safety activities outside or peripheral to normal practices
- client/customer relationships
- contra-indications/contra-actions

Therefore, a simulated activity is viewed as 'any structured assessment exercise involving a specific task which reproduces real life situations'. In this it is distinct and separate from the use of an approved realistic working environment as the latter allows the candidate to perform an entire occupational role over an extended period of time, in an environment which as closely as possible replicates the working environment and involves real work on real clients drawn from members of the public.

Habia considers evidence generated in a realistic working environment meeting the criteria set out in Appendix 1A, as acceptable for the purposes of beauty and spa therapy NVQ/SVQ assessment. The use of realistic working environments will be necessary to promote access to assessment for some beauty and spa therapy candidates at present.

Simulated activities may only be used for Habia developed units where indicated in Appendix 1B. An additional, specific dispensation has been given to schemes operating in HM Prison Service whereby use of replica money is allowed within Unit G4 (Fulfil salon reception duties) to prevent barriers to access caused by prison rules on cash usage.

In addition to this, internal telephone systems can be used to cover Range 2 in particular by telephone. However, this cannot be done as a simulated activity and cannot be used within a role-play situation. The internal telephone system must be a permanent fixture and not set up for role-play activities.





The Institute of Customer Service (ICS) has given a special dispensation for the 'imported' Customer Service unit listed below to be assessed in a Realistic Working Environment (RWE) conforming to Habia's criteria specified in Appendix 1A:

Unit G18 (ICS Unit 10), Level 2: Promote additional services or products to clients

This dispensation in no way implies that the Customer Service NVQ/SVQ itself can be achieved in an RWE. The dispensation only applies to the imported unit above.

As a matter of policy, Habia will work with industry experts and its Awarding Bodies to develop basic Evidence Requirements for use where Beauty and Spa Therapy National Occupational Standards are used for NVQ/SVQ purposes.





Approach to Achieving Greater External Quality Control of Assessment

Our strategy to address the above is as follows:

An overall 100% achievement rate for the entire underpinning knowledge and understanding specification in the National Occupational Standards should be required of each candidate.

Habia requires all Awarding Bodies to develop externally set mandatory question papers to cover critical areas of essential knowledge and understanding within specified units for the Beauty Therapy Levels 1, 2 and 3 and Spa Therapy Level 3 NVQs/SVQs. These units and the critical areas of knowledge have been detailed in Appendix 1C for Beauty and Spa Therapy units.

For the Beauty Therapy Level 1 NVQ/SVQ, Habia requires all Awarding Bodies to set mandatory question papers to cover the critical areas of essential knowledge and understanding as specified in Appendix 1C. These papers should be designed so they may be administered by written or oral means at the discretion of the assessor.

All mandatory question papers should be internally marked by assessors using answer and/or marking guides supplied by the Awarding Body. A minimum of two differently designed sets of questions and associated answer guides should be provided for all mandatory, designated areas of questioning.

For externally set mandatory question papers, a 70% achievement rate must be attained under formal, 'closed book' assessment conditions, to avoid the necessity of a re-sit of the complete paper. For those achieving 70% or more, questions answered incorrectly may be reassessed by a variety of means (eg oral questioning, a repeat of the written questions, assignments) to ensure 100% achievement on the mandatory areas of questioning for the units being undertaken.

All question and answer sheets must be collected from candidates and securely retained by the centre for internal and external verification purposes. It is expected suitable systems will be in place to prevent copying or plagiarism.

It is anticipated that Awarding Bodies will make suitable alternative arrangements for those with identified special needs which may preclude them from undertaking written assessments (eg candidates who are identified as dyslexic).

It is expected Awarding Bodies will ensure:

- the design of testing does not discriminate between those taking full qualifications and individual units
- that assessment instruments do not directly or indirectly discriminate against any particular group and ensure equality of opportunity appropriate to employment in the beauty and spa therapy industries
- that candidates are not expected to repeat questions on knowledge 'common' to several units
- arrangements are in place for testing to be carried out at a time to meet individual needs and rate of progress
- where necessary, suitable arrangements are in place for reassessment of those areas where candidates have been shown to be 'not yet competent'



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suitable arrangements are put in place for those with disabilities affecting their reading and writing capabilities.

Assessment of Essential Knowledge and Understanding Items Outside the Specification for Externally Set Mandatory Question Papers

As a 100% achievement rate is required for the entire Knowledge and Understanding specification for each unit for each candidate, other means such as oral questioning and additional portfolio evidence must be used to demonstrate that all remaining items of underpinning knowledge and understanding have been assessed and achieved satisfactorily.

Habia also requires that the Nationally Agreed Maximum Service Times quoted in Appendix 1F are used for assessment purposes for the particular, critical services listed for each level of the Beauty Therapy and Spa Therapy NVQs/SVQs.

Requirements for the Occupational Expertise of External Verifiers, **Internal Verifiers and Assessors**

Habia requires that:

In addition to the requirements set out by the Regulatory Bodies, Habia specify the appropriate occupational expertise requirements. These requirements have been detailed in Appendix 1D for Beauty Therapy and Spa Therapy. All Habia Awarding Bodies must comply with these requirements when recruiting and selecting external verifiers and implement the requirements within their current external verifier teams. All Habia Awarding Bodies must ensure their Approved Centres comply with these requirements when recruiting and selecting internal verifiers and assessors and implement the requirements with their current internal verifiers and assessors.

It is expected that as part of Awarding Body internal quality assurance processes, the qualifications and occupational expertise requirements of all involved in the assessment and verification process will be regularly monitored and recorded.

Because of the ever changing nature of the industries Habia represents, it is essential that assessors and verifiers keep their technical skills up-to-date and at an occupational level appropriate to the NVQs/SVQs they are assessing or verifying. All assessors and verifiers must be able to demonstrate to their Awarding Body that they engage in appropriate continuing professional development (CPD) activities.

To ensure consistency of approach on this matter across all Awarding Bodies delivering Habia NVQs/SVQs, it is a requirement that all Awarding Bodies implement Habia's minimum requirements for CPD activities and put systems in place to monitor, record and ensure assessor and verifier achievement against these requirements. These appear in Appendix 1E for Beauty and Spa Therapy.



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APPENDICES

Requirements Relating to the Beauty Therapy and Spa Therapy NVQs/SVQs

Appendix 1A Beauty and Spa Therapy Realistic Working

Environment Requirements

Appendix 1B Summary of Where Simulated Activities

May be Used for Habia Developed Units

Appendix 1C Areas within the Beauty and Spa Therapy

> National Occupational Standards for which Mandatory Written Question Papers must

be Developed

Appendix 1D Occupational Expertise Requirements for

Beauty and Spa Therapy Assessors and

Verifiers

Requirements for Continuing Professional Appendix 1E

> Development for Assessors and Verifiers of Beauty and Spa Therapy Technical Units

Appendix 1F Nationally Agreed Maximum Service Times

> for Beauty Therapy and Spa Therapy NVQ/SVQ Assessment Purposes





APPENDIX 1A

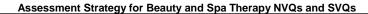
BEAUTY AND SPA THERAPY REALISTIC WORKING ENVIRONMENT REQUIREMENTS

As the Standards Setting Body for the hair and beauty sectors, Habia is responsible for defining what constitutes a 'Realistic Working Environment' (RWE). Habia has set down the following criteria for the assessment location. This will ensure that all candidates are being assessed against the National Occupational Standards in a realistic working environment when not in an actual, commercial workplace.

The following criteria must be included as part of centre approval and must be confirmed as being met during the first external verification visit. The criteria must then continue to be met on every subsequent visit. This will ensure that candidates are able to meet commercial needs in the workplace.

- Assessment centres must develop realistic management procedures that incorporate
 a 'salon and/or spa image*' and sales and marketing policy to attract the type and
 number of clients needed to ensure that the requirements of the National
 Occupational Standards can be achieved.
- All assessments must be carried out under realistic commercial pressures and on paying clients and not other candidates within the same group. Wherever possible, clients should vary in age and ethnicity so that the requirements of the National Occupational Standards can be achieved.
- 3. All services that are carried out should be completed in a commercially acceptable timescale. Maximum service times for particular, critical services have been developed by Habia for each Beauty Therapy and Spa Therapy NVQ/SVQ and are detailed in Appendix 1F. These times should be used for assessment purposes.
- 4. Candidates must be able to achieve a realistic volume of work.
- 5. The space per working area conforms to health and safety legislation and commercial practice.
- 6. The range of services, professional products, tools, materials and equipment must be up-to-date and available for use. They must enable candidates to meet the requirements of the National Occupational Standards.
- 7. A reception area where clients are greeted and general enquiries and appointments can be made by telephone or in person must be available. The reception area must also include a payment facility.
- 8. A retail facility must be provided with products that relate to the clients' needs and the services offered.
- 9. The RWE must take full account of any bye-laws, legislation or local authority requirements that have been set down in relation to the type of work that is being carried out there.
- 10. Candidates must work in a professional manner taking into account establishment requirements such as:
 - i. appearance and dress code
 - ii. personal conduct
 - iii. hygiene
 - iv. reliability
 - v. punctuality.
- 11. Candidates are given workplace responsibilities to enable them to meet the requirements of the National Occupational Standards.
- * The use of the word 'salon' is not intended to deny access to the beauty or spa therapy qualification if you deliver services in other locations (eg hospitals, care centres etc). It refers to any place where professional







services are carried out. However, the location must meet health and safety requirements for beauty and spa therapy.





APPENDIX 1B

SUMMARY OF WHERE SIMULATED ACTIVITIES MAY BE USED FOR ASSESSMENT OF HABIA DEVELOPED UNITS

Simulated activities may be used for the following, if naturally occurring performance evidence is not available:

Level 2 Unit G4, Fulfil salon reception duties,

Outcome 4

'Methods of Payment' Range Variables: 'cash equivalent', 'cheque' and 'payment card' methods of payment.

'Payment Discrepancies' Range Variables

A special dispensation will continue to exist which allows the use of artificial money in HM Prisons.





APPENDIX 1C

AREAS WITHIN THE BEAUTY AND SPA THERAPY NATIONAL OCCUPATIONAL STANDARDS FOR WHICH MANDATORY WRITTEN **QUESTION PAPERS MUST BE DEVELOPED**

As a minimum requirement, Awarding Bodies are required to develop appropriate question papers to cover the areas of Knowledge and Understanding listed below. A written paper must be produced for each technical unit. It is also recommended that a separate written paper be produced to cover the anatomy and physiology across all of the units in each qualification to prevent repetition. For Beauty Therapy Level 1, these papers should be deliverable in either written or oral formats at the discretion of the assessor. Appropriate written question papers must be available for the Beauty Therapy NVQs/SVQs Levels 2 and 3 and the Spa Therapy NVQ/SVQ Level 3.

Beauty Therapy Level 1: Areas of Knowledge Within Beauty Units Requiring Mandatory Written Questions

Unit Title	Knowledge Areas
Unit B1: Prepare and maintain salon treatment work areas	 your responsibilities under relevant health and safety legislation the importance of the correct storage of client records in relation to the Data Protection Act why it is important to maintain standards of general hygiene and the principles of avoiding cross-infection the different types of sterilising equipment and products available the differences between sterilisation and disinfection the different types of chemicals used for disinfection how to dispose of waste materials and products from the treatments in the range
Unit B2: Assist with facial skin care treatments	 the types of facial products in the range and how to use them the types of conditions and disorders that may restrict the treatment, why and how to recognise them (eg cold sores, conjunctivitis, eczema, psoriasis, cuts, abrasions, redness, swelling, skin irritation) the basic structure of the skin (epidermis, dermis) the basic function of the skin (protection, temperature control and sensitivity) the skin characteristics and skin types of different ethnic client groups how to recognise the different skin types within the range the reasons for cleansing, toning, mask application and moisturising the benefits of cleansing, toning, mask application and moisturising the contra-actions that could occur during facial treatments and what action to take
Unit B3: Assist with day make- up	 the basic structure of the skin (ie epidermis, dermis) the basic function of the skin (ie protection, temperature control, sensitivity) how to recognise the skin types listed in the range



	 the skin characteristics and skin types of different ethnic client age groups how to recognise the following basic skin conditions: sensitive, comedone, milia, dehydrated, broken capillaries, pustules, papules, open pores, dark circles the types of conditions and disorders that may contraindicate the treatment and why (eg cold sores, conjunctivitis, , , open cuts andabrasions, , swelling, skin irritation) and how to recognise them the types of conditions and disorders that may restrict the treatment and why (eg healed eczema and psoriasis, redness, bruising, skin irritation) and how to recognise them possible contra-actions which may occur during the make-up treatment and how to deal with them (eg excessive perspiration, adverse skin reactions, watery eyes, excessive erythema)
Unit N1: Assist with nail services	 the types of conditions and disorders that may contraindicate the service and why (eg fungal, viral, bacterial and parasitic infections to the skin and nails, severe dermatitis, eczema and psoriasis, unknown swelling or redness) and how to recognise them the types of conditions and disorders that may restrict the service and why (eg cuts, abrasions, bruising) and how to recognise them the structure of the nail unit (including matrix, nail plate, nail bed, cuticle, free edge) the basic structure of the skin (including epidermis and dermis) the different types of nail and skin products the uses of different types of products for nails and skin the effects on the nails of incorrect use of nail service tools the contra-actions that could occur after nail services and what advice to give to clients



Beauty Therapy Level 2: Areas of Knowledge Within Beauty and Spa Therapy Units Requiring Mandatory Written Questions

Unit Title	Area of Knowledge
Unit B4: Provide facial skin care treatment	 the structure of the skin (ie the layers of the epidermis, the dermis, the subcutaneous layer, the hair follicle, the hair shaft, the sebaceous gland, arrector pili muscle, sweat gland, blood and lymph vessels and sensory nerve endings) the function of the skin (ie sensitivity, heat regulation, absorption, protection, excretion, secretion and vitamin D production) the skin characteristics and skin types of different ethnic client groups the actions of the facial, neck and shoulder muscles (ie frontalis, corrugator, temporalis, orbicularis oris, buccinator, risorius, mentalis, zygomaticus, masseter, depressors of the lower lip, sternocleidomastoid, platysma, trapezius, pectoralis and deltoid) bones of the head, neck and shoulder girdle, including: for the skull: occipital, frontal, parietal, temporal, sphenoid, ethmoid for the face: zygomatic, mandible, maxillae, nasal, vomer, turbinate, lacrimal, palatine for the neck: cervical vertebrae for the chest: sternum the position of the head, face, neck, chest and shoulder girdle bones the position of the face, neck and shoulder muscles how the natural ageing process affects facial skin and muscle tone
	 the composition and function of blood and lymph and its role in improving skin and muscle condition. those contra-indications requiring medical referral and why (eg bacterial - impetigo; viral - herpes simplex; fungal - tinea; systemic medical conditions; conjunctivitis, severe skin conditions and eye infections; acne, boils, herpes zoster and warts, parasitic infection such as pediculosis and scabies) those contra-indications which restrict treatment and why (eg recent scar tissue, eczema, psoriasis, hyperkeratosis, skin allergies, cuts, abrasions, bruising, styes)
	 how to adapt facial techniques for male and female clients how environmental and lifestyle factors affect the
	 condition of the skin the recommended frequency of treatments the range and uses of products available for facial treatments
	 the reasons for and benefits of: cleansing the skin, exfoliating the skin, toning the skin, warming the skin, applying massage, applying masks and skin care products
	 the effects of massage techniques on the skin, muscle





	 and underlying structures the different types of masks and their effects on the skin how to identify erythema and its causes possible contra-actions which may occur during the facial treatment and how to deal with them (eg excessive erythema, irritations) products for home use that will be benefit the client and those to avoid and why
Unit B5: Enhance the appearance of eyebrows and eyelashes	 how to carry out a skin sensitivity test and why it should be conducted how to interpret the results of a skin sensitivity test how to measure the eyebrow for shaping treatments the shape and proportions of the eyebrow in relation to facial features and shape the recommended time intervals between eyebrow shaping treatments the reasons why soothing the eyebrow area may be necessary during treatment and how this is achieved the types of soothing agents available and their effect on the eye area and the precautions necessary to avoid harm how to maintain and care for tweezed eyebrows how the colour characteristics of the client's hair can affect the timing for tint development how oxidisation affects the shelf life of tint and at what point in the tinting process the tint should be mixed the factors that prevent the tinting process from working the factors that prevent artificial lashes adhering the maintenance and care requirements for artificial lashes those contra-indications requiring medical referral and why, including severe skin conditions and eye infections those contra-indications which prevent treatment and why (eg conjunctivitis, bacterial infections, inflammation of the skin, eye diseases and disorders, bruising, allergies to tint adhesives and solvents) the action to take if tint adhesive or solvent enters the client's eye how to identify erythema and its causes the possible contra-actions resulting from lash and brow treatments and how to deal with them (eg
Unit B6: Carry out waxing services	 allergies) why minors should not be given treatments without informed and signed parental or guardian consent the type of personal protective equipment that should be available and used by yourself why it is important to use personal protective equipment what is contact dermatitis and how to avoid developing it when carrying out waxing treatments the importance of questioning clients to establish any contra-indications to waxing treatments
	 why it is important to record client responses to questioning





•	the legal significance of client questioning and
	recording clients' responses

- the structure of the skin (ie the layers of the epidermis, the dermis, the subcutaneous layer, the hair follicle, the hair shaft, the sebaceous gland, arrector pili muscle, sweat gland, blood and lymph vessels and sensory nerve endings) and differences in the structure of the skin for the different client groups
- the function of the skin (ie sensitivity, heat regulation, absorption, protection, excretion, secretion and vitamin D production)
- the structure of the hair
- the basic principles of hair growth (ie anagen, catagen,
- the types of hair growth (including terminal and vellus)
- those contra-indications requiring medical referral and why (eg severe and infectious skin conditions, diabetes and severe varicose veins)
- those contra-indications that will prevent treatment but will not require medical referral and why (eg thin and or fragile skin, scar tissue under six months old, certain medication such as steroids, heat rash, sunburn, known allergies to products and ingredients such as rosin found in sticking plasters and wax)
- those conditions which restrict treatment and why (eg diabetes, moles, infected ingrowing hairs, skin tags, medication)
- how to recognise and deal with the contra-actions that can occur as a result of waxing treatments (eg bruising, blood spots, abrasions, broken hair, histamine (allergic) reaction, excessive erythema, excessive and diminished regrowth)
- the suitability of specific products for certain hair types
- the precautions which need to be taken when removing hair around conditions which restrict the treatment
- the advantages, disadvantages and limitations of facial waxing treatment and suitable alternative facial hair removal treatments
- other methods of hair removal (eg tweezing, shaving, depilatory creams, electrical depilatory, threading, abrasive mitts, epilation, intensive pulse light, laser) and the effect of these methods on the waxing process

Unit B7: Carry out ear piercing

- the external structure of the ear, including the pinna, lobe, cartilage and cartiligenous tissue
- the dangers associated with piercing cartilage and • other areas of the body
- those contra-indications that prevent treatment and require referral to a general practitioner and why, (eg systemic medical conditions, serious localised skin infections and ear lobe infections etc)
- those contra-indications that restrict treatment and why (eg previous ear piercings, scar tissue)
- the importance of and reasons for not naming specific contra-indications when referring clients to a general practitioner
- the action to take in the event of ear lobe piercing gun malfunction
- the range and uses of aftercare products





	the risks associated with ear lobe piercing if treatment advice is ignored
	the reasons why one pair of studs should be fitted at a time
	why ear studs have to be left in place for the
	recommended time and the effects of premature removal
Unit B8: Provide make-up services	the issues surrounding the delivery of make-up convices to minore.
Services	 services to minors how to prepare and correctly position the client for optimum make-up application and the importance using seating at the correct height the structure of the skin (ie the layers of the epidermis, the dermis, the subcutaneous layer, the hair follicle, the hair shaft, the sebaceous gland, arrector pili muscle, sweat gland, blood and lymph vessels and sensory nerve endings) the function of the skin (ie sensitivity, heat regulation, absorption, protection, excretion, secretion and vitamin D production) the skin characteristics and skin types of different ethnic client groups how to recognise the skin types listed in the range
	 how to recognise the following skin conditions: sensitive, dehydrated, broken capillaries, pustules, papules, open pores, dark circles, hyper pigmentation, hypo pigmentation, sun damaged, scarring and erythema
	 the factors that affect the skin ageing process how environmental and lifestyle factors affect the condition of the skin
	those contra-indications requiring medical referral and why (eg bacterial - impetigo; viral - herpes simplex; fungal - tinea; systemic medical conditions; conjunctivitis, severe skin conditions and eye infections; acne, boils, herpes zoster and warts, parasitic infection such as peduculosis and scabies)
	 those contra-indications which restrict the service and why (eg recent scar tissue, eczema, hyper-keratosis, skin allergies, bruising, styes, watery eyes) possible contra-actions which may occur during the
	make-up service and how to deal with them (eg excessive perspiration, adverse skin reactions, watery eyes, excessive erythema)
	 how to identify erythema and its causes. how lighting affects the perception of colour and its influence on the effect of make-up
	the reasons for matching lighting with the occasion for which the make-up will be worn (eg bridal make-up rehearsal in daylight)
Unit B10: Enhance appearance using skin camouflage	 the importance of allowing the client to indicate the area requiring camouflage why it is important never to assume the area to be
	 camouflaged the questioning and listening skills you need in order to find out information
	the importance of avoiding intrusive questioning techniques





	the importance of recognising different skin types and characteristics
	the photosensitivity of skin and how it differs in different skin groups (ie the Fitzpatrick Classification System)
	the causes and appearance of skin conditions likely to need skin camouflage (eg hypo-pigmentation such as vitiligo, stretch marks; hyper-pigmentation such as melasma, age spots; and erythema such as rosacea and thread veins) principles of colour theory (eg complementary colours)
	the importance of understanding when it may be necessary to apply a complementary colour prior to the skin match
	the importance of testing for a colour match on a small area
	attributes and limitations of products (eg appearance of applied products under different circumstances such as titanium dioxide and iron oxide in flash photography and on skin)
Unit N2: Provide manicure services	the types of conditions and disorders that may contra- indicate the service and why (eg fungal, bacterial, viral and parasitic infections to the skin and nails, severe nail separation, severe eczema, psoriasis and dermatitis)
	the types of conditions and disorders that may restrict the service and why (eg minor nail separation, minor eczema, psoriasis and dermatitis, severely bitten or damaged nails)
	the importance of and reasons for not naming specific contra-indications when referring clients to a general practitioner
	how to identify treatable nail and skin conditions (eg weak, dry, brittle and ridged nails; dry, split and overgrown cuticles)
	the bones of the hand and lower arm
	the muscles of the lower arm and hand
	the blood circulation to the lower arm and hand
	the structure of the nail unit (ie the nail plate, nail bed,
	matrix, cuticle, lunula, hyponychium, eponychium, nail wall, free edge, the lateral nail fold)
	the process of nail growth (ie nail formation, growth rate, factors affecting growth, the effects of damage on growth, nail thickness)
	the structure and function of the skin (ie dermis, epidermis, subcutaneous layer, appendages)
	the skin characteristics and skin types of different
	ethnic client groups
	 how to adapt manicure service to suit a male client the benefits and effects of the hand and nail treatments
	in the range
	the features and benefits of manicure products
	the effects of massage techniques on the nails, skin, muscles and underlying structures
	the different types of massage mediums and when they should be used
	the reasons for applying base and top coat and the
	consequences of not doing so
	possible contra-actions which may occur during or after





	the meaning comit-
Linit NO: Dravida madiavra	the manicure service
Unit N3: Provide pedicure services	 the types of conditions and disorders that may contra- indicate the service and why (eg fungal, bacterial, viral and parasitic infections to the skin and nails, severe nail separation, severe eczema, psoriasis and dermatitis, infected ingrowing toe nails) the types of conditions and disorders that may restrict
	the service and why (eg bunions, corns, callouses, damaged nails and varicose veins)
	the importance of and reasons for not naming specific contra-indications when referring clients to a general practitioner
	how to identify treatable nail and skin conditions (eg discoloured, dry, brittle, ridged and thickened nails; overgrown cuticles)
	 the bones of the foot and lower leg the muscles of the lower leg and foot
	the blood circulation to the lower leg and foot
	the structure of the nail unit (ie the nail plate, nail bed, matrix, cuticle, lunula, hyponychium, eponychium, nail wall, free edge, the lateral nail fold)
	the process of nail growth (ie nail formation, growth rate, factors affecting growth, the effects of damage on growth, nail thickness)
	the structure and function of the skin (ie dermis, epidermis, subcutaneous layer, appendages)
	 the skin characteristics and skin types of different ethnic client groups how to adapt pedicure service to suit a male client
	 the benefits and effects of the foot and nail treatments in the range
	 the features and benefits of pedicure products the effects of massage techniques on the nails, skin,
	 muscle and underlying structures the different types of massage mediums and when they should be used
	the reasons for applying base and top coat and the consequences of not doing so
	possible contra-actions which may occur during or after the pedicure service
Unit S1: Assist with spa operations	your responsibilities under current Control of Substances Hazardous to Health (COSHH) Regulations for the correct use and storage of
	 chemicals required for spa treatments what is contact dermatitis and how to avoid developing
	it when carrying out the maintenance of spa treatment areasthe possible dangers of chemical and equipment
	misusethe recommended operating temperatures and
	 humidity levels for wet and treatment areas why it is important to maintain standards of hygiene and the principles of avoiding cross-infection
	 how to test and interpret results of water and chemical concentrations
	the ideal operating temperatures for wet area equipment and how to accurately take temperature readings





the main types of air and waterborne infections that can affect spa environments and clients the cleaning regimes which must be used in spa work areas to avoid the spread of infection and the nature of air and waterborne infection the possible contra-actions which can occur during water, temperature and spa treatment sessions (including feeling faint, feeling nauseous, skin irritation and headaches) and how to deal with them B34: Provide threading services the importance of changing the thread throughout the threading service when using the mouth method to minimise the risk of cross-infection the structure and function of the skin and hair (ie the layers of the epidermis, the dermis, the subcutaneous layer, the hair follicle, the hair shaft, the sebaceous gland, arrector pili muscle, sweat gland, blood and lymph vessels and sensory nerve endings) the basic principles of hair growth (ie anagen, catagen, telogen) causes of hair growth (ie topical, congenital, systemic) the contra-indications that would prevent the service and why eg contagious skin conditions, recent scar tissue, sunburn, active eczema, eye infections, skin allergies, unclaignosed lumps and bumps the conditions which restrict the service and why eg moles, infected ingrowing hairs, skin tags, cuts and bruises, stings and bites how to recognise and deal with the contra-actions that can occur as a result of threading treatments eg blood spots, abrasions, broken hair, histamine (allergic) reaction, excessive erythema the importance of using a professional thread the advantages, disadvantages and limitations of threading threading techniques the importance of adapting threading techniques to suit different hair densities and lengths the importance of adapting threading techniques to suit different hair densities and lengths the benefits of combining threading techniques to suit different hair densities and lengths other salon services eg waxing, sugaring, eyebrow tinting, barbering other methods of hair removal (eg tweezing, shaving, depilatory cr	
threading service when using the mouth method to minimise the risk of cross-infection the structure and function of the skin and hair (ie the layers of the epidermis, the dermis, the subcutaneous layer, the hair follicle, the hair shaft, the sebaceous gland, arrector pili muscle, sweat gland, blood and lymph vessels and sensory nerve endings) the basic principles of hair growth (ie anagen, catagen, telogen) causes of hair growth (ie topical, congenital, systemic) the contra-indications that would prevent the service and why eg contagious skin conditions, recent scar tissue, sumburn, active eczema, eye infections, skin allergies, undiagnosed lumps and bumps the conditions which restrict the service and why eg moles, infected ingrowing hairs, skin tags, cuts and bruises, stings and bites how to recognise and deal with the contra-actions that can occur as a result of threading treatments eg blood spots, abrasions, broken hair, histamine (allergic) reaction, excessive erythema the importance of using a professional thread the advantages, disadvantages and limitations of threading the importance of performing safe, quick and effective knotting and looping threading techniques the importance of adapting threading techniques to suit different hair densities and lengths the benefits of combining threading in conjunction with other salon services eg waxing, sugaring, eyebrow tinting, barbering other methods of hair removal (eg tweezing, shaving, depilatory creams, electrical depilatory, abrasive mitts, light based hair reduction, waxing, electrical epilation) and the effect of these methods on the threading service aftercare requirements for threading services and why these are important eg avoidance of heat and friction, use of perfumed, chemical based and make-up	 can affect spa environments and clients the cleaning regimes which must be used in spa work areas to avoid the spread of infection and the nature of air and waterborne infection the possible contra-actions which can occur during water, temperature and spa treatment sessions (including feeling faint, feeling nauseous, skin irritation
	 threading service when using the mouth method to minimise the risk of cross-infection the structure and function of the skin and hair (ie the layers of the epidermis, the dermis, the subcutaneous layer, the hair follicle, the hair shaft, the sebaceous gland, arrector pili muscle, sweat gland, blood and lymph vessels and sensory nerve endings) the basic principles of hair growth (ie anagen, catagen, telogen) causes of hair growth (ie topical, congenital, systemic) the contra-indications that would prevent the service and why eg contagious skin conditions, recent scar tissue, sunburn, active eczema, eye infections, skin allergies, undiagnosed lumps and bumps the conditions which restrict the service and why eg moles, infected ingrowing hairs, skin tags, cuts and bruises, stings and bites how to recognise and deal with the contra-actions that can occur as a result of threading treatments eg blood spots, abrasions, broken hair, histamine (allergic) reaction, excessive erythema the importance of using a professional thread the advantages, disadvantages and limitations of threading the importance of adapting threading techniques the importance of adapting threading techniques to suit different hair densities and lengths the benefits of combining threading in conjunction with other salon services eg waxing, sugaring, eyebrow tinting, barbering other methods of hair removal (eg tweezing, shaving, depilatory creams, electrical depilatory, abrasive mitts, light based hair reduction, waxing, electrical epilation) and the effect of these methods on the threading service aftercare requirements for threading services and why these are important eg avoidance of heat and friction, use of perfumed, chemical based and make-up





Beauty Therapy Level 3 and Spa Therapy Level 3: Areas of Knowledge Within Beauty and Spa Therapy Units Requiring Mandatory Written **Questions**

Unit Title	Knowledge Areas
Unit B11: Design and create fashion and photographic make-up	 health and safety requirements associated with make-up techniques the importance of recognising contra-indications and restrictions to the make-up the steps that should be taken to ensure you are adequately insured the importance of agreeing contractual arrangements prior to commencing your design plan the importance of setting and working to a budget the importance of specifying resource needs accurately the principles of colour theory (eg complementary colours) how different types of lighting and camera effects impact on the make-up sources of research information and how to access and evaluate them
	 where to obtain make-up, products and equipment
Unit B12: Plan and provide airbrush make-up	 the importance of recognising contra-indications and restrictions to airbrush make-up eg respiratory problems the types of problems that can occur with airbrush equipment and how to correct them the meaning of psi and the potential risks associated with the use of pressurised airbrush equipment the importance of using equipment with a pressure gauge the types of equipment available for airbrushing and how and when to use them the differences between cup feed and gravity feed airbrushes and when to use them the basic principles of complementary colour theory how lighting affects the perception of colour and its influence on the effect of make-up the reasons for matching lighting with the occasion for which the make-up will be worn (eg bridal make-up rehearsal in daylight)
Unit B13: Provide body electrical treatments	 the characteristics of different body types and body conditions (eg endomorph, ectomorph and mesomorph, cellulite, poor muscle tone, uneven skin tone and sluggish circulation) structure and function of the skeleton the structure and function of muscles, including the types of muscles (ie voluntary and involuntary) the effect of exercise on muscle tone and how it can vary the positions and actions of the main muscle groups in the part of the body specified in the range (ie deltoid, biceps, triceps, brachialis, radialis trapezius, latissimus dorsi, erector spinae, pectorals, intercostals, diaphragm, rectus abdominis, obliques, gluteals, hamstrings, quadriceps extensor, abductors, adductors





- of upper leg, gastrocemius, soleus, tibialis anterior)
- the definition of 'origin' and 'insertion' of a muscle
- the causes of muscle fatigue and how to recognise it
- the basic structure and function of skin (ie the layers of the epidermis, subcutaneous layer, the dermis, including connective tissues, nerve endings, sweat glands, sebaceous glands, capillaries and hairs)
- the skin characteristics and skin types of different ethnic client groups
- the structure. location and the body's utilisation of adipose tissue
- the function of the endocrine system and its relationship to weight gain and loss
- the function of the digestive system
- the basic principles of healthy eating
- how ageing affects the body and skin
- how age limits the effectiveness of the treatment
- the function of blood and the principles of circulation, blood pressure and pulse
- the structure and function of the heart and arteries, veins and capillaries
- how to identify erythema and its causes
- the structure and function of the lymphatic system, including lymphatic vessels, nodes and lymph of the
- the principles of lymph circulation and the interaction of lymph and blood within the circulatory system
- the basic principles of the central nervous system, motor points and autonomic system
- the effect of electrical treatment on the muscles, skin, circulatory, skeletal, lymphatic, endocrine, digestive and nervous systems
- those contra-indications which prevent body electrical treatment and why (eg contagious skin diseases, dysfunction of the nervous system, heart disease/disorder, undergoing medical treatment, pacemaker, any cancer related treatments, recent scar tissue, undiagnosed lumps, inflammations and swellings, medication causing a thinning or inflammation of the skin, (eg steroids, accutane, retinols, diagnosed sclerodema)
- those conditions which restrict treatment and why (eg diabetes, epilepsy, high/low blood pressure, history of thrombosis or embolism, metal pins or plates, medication, pregnancy, piercings, anxiety, varicose veins, cuts, abrasions, bruises, recent dermabrasion or chemical peels, IPL or laser and epilation)
- possible contra-actions which may occur during the treatment and how to deal with them (eg galvanic burn, bruising, irritation, allergic reaction, excessive erythema, muscle fatigue, hyper-pigmentation etc)
- the benefits and effects of electro-therapy machines which combine different currents and their effects
- the benefits of products available for electrical treatments and their effects
- the type of currents produced by galvanic units, EMS units, micro-current units and lymphatic drainage equipment





Unit B14: Provide facial electrical treatments	 the physical effects created by the use of the equipment in the range the types of post-treatment products available and why they are necessary the lifestyle factors and changes that may be required to improve the effectiveness of the treatment post treatment restrictions and future treatment needs how current eating and exercise habits can affect the effectiveness of treatment how healthy eating and exercise can improve the effectiveness of the treatment the position of the primary bones of the skull and shoulder girdle and the functions of the skull
	·
	 and recent dermabrasion) those contra-indications restricting treatment and why (eg diabetes, epilepsy, high/low blood pressure, micropigmentation, history of thrombosis or embolism, botox, demal fillers, metal pins or plates, medication, pregnancy, piercings, anxiety, cuts, abrasions, bruises, chemical peels, IPL or laser and epilation) possible contra-actions which may occur during the treatment and how to deal with them (eg galvanic burn, bruising, irritation, allergic reaction, excessive





	 erythema, muscle fatigue, hyper/hypo-pigmentation) the benefits and effects of electro-therapy machines which combine different currents and their effects the benefits of products available for facial electrical treatments and their effects the type of currents produced by direct high frequency units, galvanic units, EMS units, micro-current units and lymphatic drainage equipment the physical effects created by the use of the equipment in the range why some facial treatments should be conducted in a certain direction why it is important to give aftercare advice the lifestyle factors and changes that may be required
	to improve the effectiveness of the treatment
	post-treatment restrictions and future treatment needs
Unit B15: Provide single	how to carry out a skin sensitivity test and why it should
eyelash extension treatments	be conducted
	how to interpret the results of a skin sensitivity test
	those contra-indications requiring medical referral and why, including infectious skin diseases and eye infections
	 those contra-indications which prevent treatment and why (eg conjunctivitis, chemotherapy, trichlotillomania, recent eye surgery, blepharitis, eye infections) those contra-indications which restrict treatment and why (eg psoriasis, styes, dry eye syndrome, glaucoma,
	contact lenses, thyroid disturbance)
	 how to identify erythema and its causes the possible contra-actions resulting from single lash system treatments and how to deal with them (eg eye irritations) the structure and cycle of hair growth
	basic structure and function of the eye
	the physical effect of the eyelash extension process on the eye (eg thickening of the cornea, overstimulation of the meibomian gland
	 the principles of blending single eyelashes how to judge the quantity of eyelashes to be added to achieve a balanced and well proportioned look
III II	the expected longevity of single lash system treatments
Unit B20: Provide body massage treatments	the structure and function of cells and tissues the structure and function of muscles, including the
massage treatments	 the structure and function of muscles, including the types of muscles (ie voluntary and involuntary) the positions and actions of the main muscle groups within the treatment areas of the body specified in the range
	the position and function of the primary bones and joints of the skeleton
	 how to recognise postural faults and conditions (eg lordosis, kyphosis, scoliosis) the structure, function and location of blood vessels and the principles of circulation, blood pressure and
	 pulse the interaction of lymph and blood within the circulatory system the structure and function of lymphatic system





	the basic principles of the central nervous system and
	autonomic system
	the basic principles of the endocrine, respiratory, digestive and excretory systems
	the structure and function of skin (ie the layers of the epidermis, the dermis, subcutaneous layer, including connective tissues, nerve endings, sweat glands,
	 sebaceous glands, capillaries and hairs) the skin characteristics and skin types of different ethnic client groups
	 the structure and location of the adipose tissue the effects of massage on the individual systems of the body
	the physical and psychological effects of body massage
	 those contra-indications that prevent treatment and why (eg deep vein thrombosis, during chemotherapy and radiotherapy, , contagious skin diseases etc) those contra-indications which may restrict treatment or where caution should be taken, in specific areas and why (eg diabetes, epilepsy, varicose veins, high and
	low blood pressure, product allergies etc)
	 what constitutes a contra-action possible contra-actions which may occur during and post treatment, why and how to deal with them (eg bruising and inflammation)
Unit B21: Provide UV tanning services	 those contra-indications that prevent UV tanning and why (eg history of skin cancer, excessive number of moles and/or freckles, moles that have changed colour, itch and/or bleed, history of sunburn, under the age of 16, skin that does not tan in sunlight, medication causing skin sensitivity etc) those conditions which restrict treatment and why (eg diabetes, sunburn, previous heat treatments, use of perfumed products, laser and IPL treatments, microdermabrasion, recent chemical peels, use of steroids, certain anti-ageing products, high and/or low blood pressure etc) those contra-actions that can occur as a result of UV tanning and why (eg burning, blistering, uneven pigmentation, feeling faint, nausea, claustrophobia etc) the importance of regularly cleaning equipment between each session and why specific cleansers should be used the structure and function of the skin, including vitamin D and melanin production the effect and changes that UVA, UVB and UVC rays can have on the skin how to recognise visible adverse reactions (eg damage to the eyes, premature ageing of the skin, an immunosuppressive response and increased risk of developing non melanoma skin cancers¹) how to recognise beneficial changes in the skin (eg improved healing capability, suppression of seborrhoea

¹ Refer to the British Medical Association (BMA) guidance on the health risks associated with UV tanning treatments.





	how to use the Fitzpatrick Classification Scale to determine skin tone
	how melanin production affects tanning capability
	why it is important to protect the hair and eyes during
	these treatments
	the importance of removing perfumed products and
	cosmetics prior to treatments (pre-sensitisation)
	how to relate the length of session to skin tone and
	type and calculate session times and safe dosage
	the principles of the electromagnetic spectrum
Unit B22: Provide specialist	the importance of allowing the client to indicate the
skin camouflage services	area requiring camouflage
	why it is important never to assume the area to be
	camouflaged
	the importance of not asking intrusive questions and
	avoiding intrusive questioning techniques
	the structure and function of the skin
	the photosensitivity of skin and how it differs in different
	skin groups (ie the Fitzpatrick Classification System)
	the healing and renewal process of skin and how it
	differs in different skin classification groups (eg
	Fitzpatrick scale)
	how ageing affects the skin and how its regenerative
	properties differs in different skin groups and lifestyle
	choices
	the causes and appearance of skin conditions likely to
	need camouflage (eg hypo-pigmentation such as
	vitiligo, stretch marks; hyper-pigmentation such as
	melasma, age spots; and erythema such as rosacea and thread veins)
	the characteristics and differences between the three
	types of scar tissue (atrophic; hypertrophic; keloid) and
	the implications of scar tissue
	the importance of recognising different skin tones (eg
	red or yellow undertones)
	the psychological effects of changed image on the
	client
	the importance of understanding the correct
	psychological approach when working with people
	requiring camouflage
	the importance of understanding such conditions as
	body dysmorphia
	the importance of understanding why skin camouflage
	should be considered a medical, rather than make-
	up/cosmetic, application
	principles of colour theory (eg complementary colours)
	the importance of understanding when it may be
	necessary to apply a complementary colour prior to the
	skin match
	the importance of testing for a skin colour match on a
	small area
	attributes and limitations of products (eg appearance of applied products under different circumstances such as
	titanium dioxide and iron oxide in flash photography
	and on skin)
	the compatibility and limitation of topical and medical
	treatments used in conjunction with skin camouflage
	(eg sun screen, ointments, make-up)
	(og our ooroon, omunono, mako ap)





	how to match instruction with individual clients' learning needs when applying skin camouflage the most suitable methods of gaining feedback from
Unit B23: Provide Indian Head Massage	skin camouflage instructional activities the structure and function of muscles, including the types of muscles (ie voluntary and involuntary) within the treatment areas the positions and actions of the main muscle groups
	 within the treatment areas the position and function of the primary bones and joints of the skeletal system within the treatment areas how to recognise postural faults and conditions within the treatment areas (eg kyphosis, scoliosis) the structure, function and location of blood vessels and the principles of circulation, blood pressure and pulse within the treatment areas the interaction of lymph and blood within the circulatory system
	 the structure and function of lymphatic system the position and function of the sinuses the basic principles of the central nervous system and autonomic system
	 the basic principles of the endocrine and respiratory systems the structure and function of skin (ie the layers of the epidermis, the dermis, subcutaneous layer, including connective tissues, nerve endings, sweat glands, sebaceous glands, capillaries and hairs)
	 the skin characteristics and skin types of different ethnic client groups the effects of Indian Head Massage on the individual systems of the body
	 the physical and psychological effects of Indian Head Massage those contra-indications that prevent treatment and why (e.g during chemotherapy and radiotherapy, skin diseases and disorders, hair and scalp disorders etc)
	 those contra-indications which may restrict treatment or where caution should be taken, in specific areas and why (eg diabetes, epilepsy, high and low blood pressure, product allergies, sebaceous cysts, eczema, acne, any medical condition with specialist or general practitioner approval etc) possible contra-actions which may occur during and
Unit PO 4. Community management	post-treatment and how to deal with them (eg light- headedness, headache)
Unit B24: Carry out massage using pre-blended aromatherapy oils	 the structure and function of cells and tissues the structure and function of muscles, including the types of muscles (ie voluntary and involuntary) the positions and actions of the main muscle groups within the treatment areas of the body specified in the range the position and function of the primary bones and
	 the position and function of the primary bones and joints of the skeleton how to recognise postural faults and conditions (eg lordosis, kyphosis, scoliosis) the structure, function and location of blood vessels and the principles of circulation, blood pressure and





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	 pulse the interaction of lymph and blood within the circulatory system
	 the structure and function of the lymphatic system the basic principles of the central nervous system and
	autonomic system
	the basic principles of the endocrine, respiratory including sinuses, olfactory, digestive and excretory systems.
	 systems the structure and function of skin (ie the layers of the
	epidermis, the dermis, subcutaneous layer, including connective tissues, nerve endings, sweat glands,
	sebaceous glands, capillaries and hairs)the skin characteristics and skin types of different
	ethnic client groups
	the structure and location of the adipose tissue
	the effects of massage using pre-blended aromatherapy oils on the individual systems of the
	body
	the physical and psychological effects of massage using pre-blended aromatherapy oils
	those contra-indications that prevent treatment and why (on deep value thrombools, during abomether any)
	why (eg deep vein thrombosis, during chemotherapy and radiotherapy, contagious skin diseases etc)
	those contra-indications which may restrict treatment or
	where caution should be taken in specific areas and
	why (eg diabetes, epilepsy, varicose veins, high and low blood pressure, product allergies, any medical
	condition with specialist or general practitioner approval etc)
	possible contra-actions which may occur during and post-treatment and how to deal with them (eg light-headedness, headache, nausea etc)
	how to store and maintain pre-blended aromatherapy oils in a safe and hygienic manner (eg in date and away from light and heat) and why this is important
Unit B25: Provide self tanning	those contra-indications which will prevent treatment
services	and why (eg severe asthma for spray tanning, contagious skin conditions etc)
	those contra-indications which restrict treatment and why (eg insulin dependent diabetes, pigmentation disorders, sunburn, psoriasis, eczema, cuts and abrasions etc)
	the contra-actions that can occur during or as a result of self tanning and why (eg skin irritation, swelling,
	 burning, itching, watery eyes, coughing, fainting etc) the potential risks associated with the use of
	pressurised spray tanning equipment
	 the ingredients of tanning products, exfoliators and moisturisers
	the importance of pre and post-treatment advice
	pigmentation disorders and how they may affect the self tan (hypo and hyper pigmentation) the use and effects of tagging a hope or an affect to the self-self-self-self-self-self-self-self-
	the use and effects of tanning enhancers





Unit B26: Provide female intimate waxing services

- the structure of the skin (ie the layers of the epidermis, the dermis, the subcutaneous layer, the hair follicle, the hair shaft, the sebaceous gland, arrector pili muscle, sweat gland, blood and lymph vessels and sensory nerve endings) and differences in the structure of the skin for different client groups
- the function of the skin (ie sensitivity, heat regulation, absorption, protection, excretion, secretion and vitamin D production)
- the skin characteristics and skin types of different ethnic client groups
- the structure of the hair
- the basic principles of hair growth (eg anagen, catagen, telogen)
- the types of hair growth (eg terminal, vellus)
- the correct medical terminology for female genitalia
- the structure of the female genitalia
- the contra-indications that prevent treatment and why but will not require medical referral (eg thin and or fragile skin, scar tissue under six months old, heat rash, sunburn, known allergies to products and ingredients such as rosin found in sticking plasters and wax)
- the contra-indications that require medical approval and why (eg urinary infections, sexually transmitted infections, pubic lice, contagious skin disease, oedema)
- the conditions which restrict treatment and why (eg moles, infected ingrowing hairs, skin tags, external haemorrhoids, medication, diabetes)
- how to recognise and deal with the contra-actions that can occur as a result of intimate waxing treatments (eg bruising, blood spots, abrasions, broken hair, histamine (allergic) reaction, excessive erythema, excessive and diminished regrowth)
- other methods of temporary hair removal (eg tweezing, shaving, depilatory creams, electrical depilatory, threading, abrasive mitts) and the effect of these methods on the waxing process
- why it is important to restrict your conversation to instructions during the intimate waxing service
- how to deal with circumstances in which client's behaviour breaches the professional status of the treatment
- why it is important to give aftercare treatment advice both verbally and in writing and what may happen if treatment advice was not given or is not followed
- why it is necessary to give clients clear and specific guidance on the importance of personal toilet hygiene and the avoidance of heat and friction
- aftercare and maintenance requirements for intimate waxing treatments and why these are important (including avoidance of heat and friction, use of perfumed and chemical based products, wearing of restrictive clothing, avoidance of touching the treated area and for how long this should be avoided, the avoidance of swimming and other exercise and for how





Unit B27:	Provide male intimate
waxing se	rvices

long this should be avoided, personal toilet hygiene)

- the structure of the skin (ie the layers of the epidermis, the dermis, the subcutaneous layer, the hair follicle, the hair shaft, the sebaceous gland, arrector pili muscle, sweat gland, blood and lymph vessels and sensory nerve endings) and differences in the structure of the skin for different client groups
- the function of the skin (ie sensitivity, heat regulation, absorption, protection, excretion, secretion and vitamin D production)
- the skin characteristics and skin types of different ethnic client groups
- the structure of the hair
- the basic principles of hair growth (eg anagen, catagen, telogen)
- the types of hair growth (eg terminal, vellus)
- the correct medical terminology for male genitalia
- the structure of the male genitalia
- the contra-indications that prevent treatment and why but will not require medical referral (eg thin and or fragile skin, scar tissue under six months old, heat rash, sunburn, known allergies to products and ingredients such as rosin found in sticking plasters and wax)
- the contra-indications that require medical approval and why (eg urinary infections, sexually transmitted infections, pubic lice, contagious skin disease, oedema)
- the conditions which restrict treatment and why (eg moles, infected ingrowing hairs, skin tags, external haemorrhoids, medication, diabetes)
- how to recognise and deal with the contra-actions that can occur as a result of intimate waxing treatments (eg bruising, blood spots, abrasions, broken hair, histamine (allergic) reaction, excessive erythema, excessive and diminished regrowth)
- other methods of temporary hair removal (eg tweezing, shaving, depilatory creams, electrical depilatory, threading, abrasive mitts) and the effect of these methods on the waxing process
- why it is important to restrict your conversation to instructions during the intimate waxing service
- how to deal with circumstances in which client's behaviour breaches the professional status of the treatment
- why it is important to give aftercare treatment advice both verbally and in writing and what may happen if treatment advice was not given or is not followed
- why it is necessary to give clients clear and specific guidance on the importance of personal toilet hygiene and the avoidance of heat and friction after intimate waxing
- aftercare and maintenance requirements for intimate waxing treatments and why these are important (eg avoidance of heat and friction, use of perfumed and chemical based products, wearing of restrictive clothing, avoidance of touching the treated area and for how long this should be avoided, the avoidance of





	swimming and other exercise and for how long this
	should be avoided, personal toilet hygiene)
Unit B28: Provide stone	what is contact dermatitis and how to avoid developing
therapy treatments	it whilst carrying out stone therapy treatments
	what is repetitive strain injury (RSI), how it is caused
	and to avoid developing it when delivering stone
	 therapy treatments the advantages to the therapist of using stone therapy
	as a means of avoiding RSI
	the structure and function of cells and tissues
	the structure and function of muscles, including the types of muscle (in voluntary involuntary and cording)
	 types of muscle (ie voluntary, involuntary and cardiac) the positions and actions of the main muscle groups
	within the treatment areas
	the position and function of the primary bones and joints of the skeleton
	the position and function of the sinuses
	how to recognise postural faults and conditions (eg lordosis, kyphosis, scoliosis)
	the structure, function and location of blood vessels
	and the principles of circulation, blood pressure and pulse
	the interaction of lymph and blood within the circulatory system
	the structure and function of lymphatic system
	the basic principles of the central nervous system and autonomic system
	the basic principles of the endocrine, respiratory,
	digestive and excretory systems
	the structure and function of skin (ie the layers of the
	epidermis, the dermis, subcutaneous layer, including connective tissues, nerve endings, sweat glands, sebaceous glands, capillaries and hairs)
	 the skin characteristics and skin types of different
	ethnic client groups
	the structure and location of the adipose tissue
	the effects of hot and cold stone therapy on the
	individual systems of the body
	the physical effects of hot and cold stone therapy treatment
	the psychological effects of hot and cold stone therapy
	treatment
	those contra-indications that prevent treatment and
	why (eg deep vein thrombosis, during chemotherapy
	and radiotherapy, contagious skin diseases, loss of skin sensitivity, clinical obesity etc)
	 those contra-indications which may restrict treatment or
	where caution should be taken, in specific areas and
	why (eg diabetes, epilepsy, varicose veins, areas of
	skin aggravated by heat etc)
	possible contra-actions which may occur during and post treatment and how to deal with them (ag reactions)
	post treatment and how to deal with them (eg reactions to extremes of temperature)
	 methods of cooling stones
	the types of stone, their properties and uses
	how to adapt a stone therapy treatment for male and
	female clients
	how stone therapy may be used to enhance other Copyright © Habia 2009





	treatments (eg manicure, pedicure, facial)
Unit B29: Provide electrical	the structure and function of the skin (ie epidermis,
epilation treatments	dermis, appendages, subcutaneous layer and nerve
	endings)
	the principles of skin healing
	the structure of the hair and its follicle (the
	pilosebaceous unit)
	 the growth pattern of the hair and how this influences present and future treatments
	 the hair growth cycle ie anagen, catagen, telogen
	 the causes of hair growth ie topical, congenital,
	systemic
	the definition of hair growth ie superfluous, hirsutism,
	hypertrichosis
	the structure and function of the endocrine system
	the effects of malfunctions of the endocrine system on
	hair growth
	 the principles of the blood and lymphatic system how hormones are circulated via the blood stream
	 the skin characteristics and skin types of different
	ethnic client groups
	those contra-indications that prevent treatment and
	why (eg infectious and contagious diseases, pace-
	makers and haemophilia,
	those conditions requiring medical approval and why (og boott problems, beir growth from moles)
	(eg heart problems, hair growth from moles)the conditions that restrict treatment and why (eg
	psoriasis, eczema, acne, epilepsy and diabetes)
	 the potential consequences of carrying out electrical
	epilation on a contra-indicated client
	 possible contra-actions which may occur during the
	treatment and how to deal with them (eg erythema,
	oedema, blanching, bleeding)
	 the principles, uses and benefits of the galvanic current the principles, uses and benefits of the alternating
	current (eg short wave, radio frequency and high
	frequency)
	the principles, uses and benefits of blending the
	galvanic and alternating current
	how to select the type and size of needle to suit the hoir type a bin type and any (a) to be type to select the
	 hair type, skin type and area(s) to be treated how to correctly insert the needle into the hair follicle
	 how to correctly insert the needle into the hair follicle with regard to depth and angle and the consequences
	of inaccurate needle insertion
	how to remove hairs from different types of follicle (ie
	single, compound and distorted)
	• the importance of recognising and treating unusual hair
	growth (eg compound hair growth, ingrowing hair)
	the benefits and effects of post treatment Cataphoresis the importance of knowing how to treat the follows of
	 the importance of knowing how to treat the follicles of red and non-pigmented hair
	 why moisture affects the electrical epilation treatment
Unit S2: Monitor clients and the	how to complete and maintain accurate records of
operation of sauna, steam and	water testing for hydrotherapy treatment areas
hydrotherapy treatments	your responsibilities under current Control of
	Substances Hazardous to Health (COSHH)
	Regulations for the correct use and storage of





chemicals required for spa treat	tments
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- what is contact dermatitis and how to avoid developing it when carrying out the maintenance of spa treatment areas
- the necessary environmental conditions for spa treatment areas (including lighting, heating, ventilation and general comfort) and why these are important
- why it is important to check the client's wellbeing at regular intervals.
- the importance of regular water intake during spa treatments for both staff and clients
- the recommended operating temperatures and humidity levels for sauna, steam and hydrotherapy equipment
- the possible dangers of chemical and equipment misuse
- the recommended treatment times and the potential risks of exceeding them
- the main types of air and waterborne infections that can affect spa environments and clients
- those contra-indications that will prevent sauna, steam and/or hydrotherapy treatments and why (eq. pregnancy, circulatory disorders, respiratory disorders, skin diseases or disorders etc)
- those contra-indications that will restrict sauna, steam and/or hydrotherapy treatments and why (eg diabetes, epilepsy etc)
- the possible contra-actions which can occur during water, temperature and spa treatment sessions (including feeling faint, feeling nauseous, skin irritation and headaches) and how to deal with them
- the contra-actions that could occur after sauna, steam and hydrotherapy treatments and what advice to give to clients
- the physiological and psychological effects of sauna treatments
- the physiological and psychological effects of steam treatments
- the physiological and psychological effects of hydrotherapy treatments
- the different physiological and psychological effects of hot and cold spa treatments on the skin and body

Unit S3: Provide body wrapping and flotation treatments

- how to maintain accurate records of water testing for wet flotation equipment
- your responsibilities under current Control of Substances Hazardous to Health (COSHH) Regulations for the correct use and storage of chemicals required for wet flotation treatments
- what is contact dermatitis and how to avoid developing it when carrying out body wrapping and flotation treatments
- the necessary environmental conditions for body wrapping and flotation treatments (including lighting, heating, ventilation, sound and general comfort) and why these are important
- why it is important to maintain standards of hygiene and the principles of avoiding cross-infection
- the characteristics of different body types (eg





- endomorph, ectomorph and mesomorph) and conditions
- the effect of exercise on muscle tone and how it can vary
- the basic structure and function of skin (ie the layers of the epidermis, subcutaneous layer, the dermis, including connective tissues, nerve endings, sweat glands, sebaceous glands, capillaries and hairs)
- the skin characteristics and skin types of different ethnic client groups
- the structure, location and utilisation of adipose tissue
- the function of the endocrine system and its relationship to weight gain and loss
- the function of the excretory system
- the function of the digestive system
- the basic principles of healthy eating
- the function of blood and the principles of circulation, blood pressure and pulse
- the structure and function of the heart and arteries, veins and capillaries
- how to identify erythema and its causes
- the structure and function of the lymphatic system, including lymphatic vessels, nodes and lymph of the body
- the principles of lymph circulation and the interaction of lymph and blood within the circulatory system
- the effect of wrap and flotation treatments on the skin, circulatory, lymphatic, endocrine, excretory and digestive systems
- those contra-indications applicable to body wrapping and flotation treatments and the courses of action to take in the event of contra-indications and why (eg thyroid imbalance, nut allergies, weeping eczema and psoriasis, circulatory disorders, any medical condition with specialist or general practitioner approval etc)
- how differing client body weight and frame impacts on flotation equipment set up and use
- the different types of pre-heat treatment that can be used prior to body wrapping and their effects
- the physiological and psychological effects of body wrapping treatments
- the possible contra-actions which can occur during body wrapping treatments and how to deal with them
- the uses and benefits of wet flotation treatments (eg tank, bath and pool)
- the uses and benefits of a dry flotation bed
- how to test and interpret results of water and chemical concentrations for wet flotation
- the physiological and psychological effects of flotation treatments
- the possible contra-actions which can occur during flotation treatments and how to deal with them
- the contra-actions that could occur after body wrapping and flotation treatments and what advice to give to clients





APPENDIX 1D

OCCUPATIONAL EXPERTISE REQUIREMENTS FOR BEAUTY AND SPA THERAPY ASSESSORS AND VERIFIERS

1 Introduction

- 1.1 As the Standards Setting Body for the hair and beauty sectors, Habia is responsible for defining the occupational expertise requirements for assessors and verifiers in consultation with employers, centres and Awarding Bodies. The assessor and verifier occupational expertise requirements for the Beauty Therapy and Spa Therapy NVQs and SVQs are shown below.
- 1.2 Please note that these requirements will take effect from 1 August 2010 and will apply to all assessors and verifiers. This version dated March 2009 supersedes all previous versions.
- 1.3 Please note all assessors and verifers still working with the existing standards will continue to use and follow the August 2007 Assessment Strategy requirements.

2 Assessors

- 2.1 From 1 August 2010 all new Beauty Therapy assessors must:
 - 2.1.1 hold EITHER the Level 2 and/or 3 Beauty Therapy NVQs/SVQs or equivalent* plus sufficient relevant post qualification industrial experience that is current and appropriate to the unit(s) of NVQ/SVQ they are intending to assess.

OR

substantial operational experience** that is current and appropriate to the unit(s) of NVQ/SVQ they are intending to assess.

2.1.2 **hold** Units D32 **and** D33*** to assess the complete Beauty Therapy NVQs/SVQs (those work based assessors only required to make and record observations may hold just D32)

OR

hold or be working towards Unit A1*** if carrying out all forms of assessment

OR

hold or be working towards Unit A2 if only carrying out observations in the workplace.

- 2.2 From 1 August 2010 all new Spa Therapy assessors must:
 - 2.2.1 **hold EITHER** the Level 3 Spa Therapy NVQ/SVQ or equivalent* plus sufficient relevant post qualification industrial experience that is current and appropriate to the unit(s) of NVQ/SVQ they are intending to assess.

OR





substantial operational experience** that is current and appropriate to the unit(s) of NVQ/SVQ they are intending to assess.

hold Units D32 and D33*** to assess the complete Spa Therapy NVQ/SVQ 2.2.2 (those work based assessors only required to make and record observations may hold just D32)

OR

hold or be working towards Unit A1*** if carrying out all forms of assessment

OR

hold or be working towards Unit A2 if only carrying out observations in the workplace.

2.3 From 1 August 2010 all existing Beauty Therapy assessors (as defined in 2.1 above) holding just the Level 2 Beauty Therapy NVQ/SVQ will only be able to assess the Level 2 Beauty Therapy NVQ/SVQ. They will not be eligible for internal verifier or external verifier roles.

Internal Verifiers 3

- 3.1 From 1 August 2010 all Beauty Therapy and Spa Therapy internal verifiers must:
 - 3.1.1 hold the Level 3 Beauty Therapy or Level 3 Spa Therapy NVQs/SVQs or equivalent* plus sufficient relevant post qualification industrial experience that is current and appropriate to the unit(s) of NVQ/SVQ they are intending to internally verify.

OR

substantial operational experience** that is current and appropriate to the unit(s) of NVQ/SVQ they are intending to internally verify and

- hold Unit A1 or Units D32 and D33 *** and 3.1.2
- hold Unit D34 or hold or be working towards Unit V1 3.1.3
- have **sufficient experience** of assessing Beauty Therapy or Spa Therapy 3.1.4 NVQs/SVQs

4 **External Verifiers**

- From 1 August 2010 all Beauty Therapy and Spa Therapy external verifiers 4.1 must:
 - 4.1.1 hold the Level 3 Beauty Therapy or Level 3 Spa Therapy NVQ/SVQ or equivalent* plus sufficient relevant post qualification industrial experience that is current and appropriate to the unit(s) of NVQ/SVQ they are intending to externally verify

OR



licensing availability. Unauthorised use may result in legal proceedings



substantial operational experience** that is current and appropriate to the unit(s) of NVQ/SVQ they are intending to externally verify and

- 4.1.2 hold Unit A1 or Units D32 and D33*** and
- 4.1.3 **hold** D35 or **hold or be working towards** Unit V2 and are strongly advised to hold Unit V1 or D34
- 4.1.4 have **sufficient experience** assessing and/or internally verifying Beauty Therapy or Spa Therapy NVQs/SVQs.

5 Assessors and verifiers for non-technical units who are not beauty therapists and spa therapists

- 5.1 There are several units in the NVQs/SVQs that cover generic skills, assessed in a beauty or spa therapy context. Some centres use assessors and verifiers from other occupations to assess and verify these.
- 5.2 ENTO Units HSS1 and HSS3, ICS Unit 10, SFEDI Units BD1 and BI2, Skillset Units HM1, HM6, HM7 and HM19 have been imported into the Habia standards for beauty and spa therapy. Assessors of these units must meet the requirements laid down by these Standards Setting Bodies in their own Assessment Strategies.
- 5.3 **Non-technical beauty and spa therapy Habia units:** the same criteria as for assessors and internal verifiers who are beauty therapists will apply, inserting the *relevant* NVQ/SVQ or equivalent qualification or experience and the *relevant* occupational area. This does not apply to external verifiers who will always be beauty or spa therapists for the Habia units. For the sake of clarification, beauty and spa therapy units cannot be internally verified by non-beauty or spa therapists.
- Occupational Expertise Requirements for Assessors who are not beauty or spa therapists

Non Beauty or Spa Therapy assessors must have the *relevant* Level 2 and Level 3 NVQs/SVQs plus sufficient *relevant* industrial experience **or** substantial operational experience that is current and appropriate to the level(s) of NVQ/SVQ units they are intending to assess. Where individuals have qualifications other than the *relevant* NVQs/SVQs, they or their centre should contact their Awarding Body to determine the acceptability of these qualifications. Assessors will only be able to assess those units in which they have formally demonstrated their competence **or** have shown evidence of operational experience.

For NVQs, *UKCES* requires that assessors hold Unit A1 or A2 (if just recording observations) **OR** Unit D32 and/or Unit D33. New assessors must have a clear action plan for achieving Unit A1 and/or Unit A2 within eighteen months of beginning assessment duties. Assessment decisions by assessors who are still working towards certification must be supported by an assessor or verifier who has gained certification. This can be achieved by checking a sample of assessment decisions.

For SVQs, SQA *Accreditation* requires that assessors be occupationally competent and **must** hold Units A1 and/or A2***, **OR** hold D32 and/or D33.

Please note that Habia generally requires assessors hold or are working towards Unit A1 **OR** hold D32 **and** D33. *In addition, in this case where the assessor does not have a beauty therapy or spa therapy background, then she/he must have obtained a working knowledge of the beauty therapy or spa therapy industry as the context for assessment, through briefing or induction, or ideally through a period of experience in a salon or spa.*





ii) Occupational Expertise Requirements for Internal Verifiers who are not beauty therapists or spa therapists.

Non Beauty or Spa Therapy internal verifiers must have the *relevant* Level 3 NVQ/SVQ plus sufficient relevant industrial experience or substantial operational experience that is current and appropriate to the level(s) of NVQ/SVQ units they are intending to internally verify. Where individuals have qualifications other than the relevant NVQs/SVQs, they or their centre should contact their Awarding Body to determine the acceptability of these qualifications. They must also have at least sufficient experience of assessing the relevant NVQs/SVQs or relevant units.

For NVQs, UKCES requires that internal verifiers hold Unit V1 or D34 and, it is recommended, also hold Unit A1 or D32 and D33. New internal verifiers must have a clear action plan for achieving Unit V1 within eighteen months of beginning internal verification. Without an appropriately qualified internal verifier, the centre must understand that it cannot submit claims for certification to the Awarding Body.

For SVQs, SQA Accreditation requires that internal verifiers be occupationally competent and must hold or be working towards Unit V1 OR hold D34. Unit A1 or D33 is also desirable***

Please note that Habia requires all internal verifiers hold Unit A1 or D32 and D33*** and hold D34 or hold or are working towards V1. In addition, in this case where the internal verifier does not have a beauty or spa therapy background, then she/he must have obtained a working knowledge of the beauty therapy or spa therapy industry as the context for assessment, through briefing or induction, or ideally through a period of experience in a salon or spa.

In this case where assessors and/or internal verifiers do not have a beauty therapy or spa therapy background, then a period of experience in a salon or attending beauty therapy or spa therapy specific event(s) relevant to the units being assessed or verified will help them become more familiar with the requirements of the beauty therapy or spa therapy industries.



^{*} Where individuals have qualifications other than the Beauty Therapy or Spa Therapy NVQs/SVQs, they or their centre should contact their Awarding Body to determine the acceptability of these qualifications. Assessors will only be able to assess those units in which they have formally demonstrated their competence or have shown evidence of operational experience.

^{**} Substantial operational experience means substantial hands on work served within the beauty therapy or spa therapy industry. This can include time in any role in the beauty therapy or spa therapy industry, for example as a therapist, trainer, lecturer, assessor, verifier or salon manager/owner,



APPENDIX 1E

REQUIREMENTS FOR CONTINUING PROFESSIONAL DEVELOPMENT FOR ASSESSORS AND VERIFIERS OF BEAUTY AND SPA THERAPY **TECHNICAL UNITS**

From 1 September 2001 as a condition of centre approval and continuing centre approval. centres were required to establish an ongoing, fully resourced Staff Development Plan, capable of supporting the Habia CPD requirement. (Preferably such a Staff Development Plan should link to IIP or other formally recognised quality assurance systems.)

Assessors and verifiers must be able to demonstrate to the Awarding Body how they keep their beauty therapy or spa therapy technical skills and knowledge up-to-date and to the occupational level at which they are assessing and/or verifying. Continuing Professional Development (CPD) must take place throughout the careers of assessors and verifiers.

This must include the completion of a minimum number of hours CPD in each twelve month period using activities approved for CPD (see below).

The minimum, annual CPD requirement for assessors and verifiers is as follows:

A total, minimum requirement for 30 hours CPD per annum which does not have to be consecutive.

The CPD requirement must be carried out in one or a combination of the types of activities listed below. No activity will carry a 'double hours' allowance.

- 'hands on' delivery of beauty therapy or spa therapy services to fee paying clients in a commercial salon or spa that can be shown to develop individual skill and knowledge levels
- undertaking technical beauty therapy or spa therapy training that develops new and/or updates existing skills and/or knowledge levels
- further beauty therapy or spa therapy qualification work

The following activities will not count towards CPD:

- reading the trade press and books
- listening to tapes and watching videos

(However, the above are recommended for background knowledge to support CPD but are **not** approved for inclusion in the CPD hours requirement.)

Individuals must provide relevant and suitable evidence that CPD has taken place within each 12 month period to be measured from 1 September - 31 August.





EXPLANATORY NOTES:

- i. technical beauty therapy and spa therapy training - external and internal workshops and training sessions are eligible.
- ii. commercial salon or spa - this is defined as a salon or spa where the majority of beauty therapists or spa therapists are already qualified and the main function of the salon or spa is not training and assessment. If a training salon or spa in a centre is closed and reopened as a commercial salon or spa, eg during holiday periods, then this is an acceptable location for CPD to be undertaken. If there is any doubt as to the acceptability of the arrangement, guidance should be sought from Habia
- iii. beauty therapy and spa therapy qualification work - the aim of this option is to encourage assessors and verifiers to gain new skills or to update current ones. Work undertaken for this option must lead to a formally assessed and accredited qualification or unit of an NVQ/SVQ.

A nominal 30 hours has been allocated to the achievement of any beauty therapy or spa therapy unit qualification in any one CPD year. The same unit should not be taken twice during the lifetime of any particular NVQ/SVQ or repeated within any 5 year period.

Other activities may be acceptable for CPD for which prior approval should be gained from Habia.

CALCULATING CPD HOURS

- a) CPD for existing assessors and verifiers is measured within each 12 month period, taken from 1 September – 31 August each year.
- b) CPD hours for new assessors and verifiers shall be measured from the date their duties commence.
- c) Assessors and verifiers who take leave from assessment or verification duties during any twelve month period will be able to collect CPD pro rata.
- d) The CPD hours for part-time assessors and verifiers will be calculated pro rata based on a nominal 37 hour week. However, a minimum of 5 hours CPD in any twelve month period must be carried out by all part-time assessors and verifiers.
 - For example, an assessor contracted for 7 hours/week: 7 ÷ 37 x 100 = approx. 20% of a full time assessor. 20% x 30 hours = 6 hours CPD in any 12 month period.
- e) A nominal time of 30 hours per NVQ/SVQ unit achieved has been set, regardless of the unit.
- If you are an assessor and a verifier, you only have to do the minimum of 30 hours f) CPD. not 60 hours.
- All External Verifiers must complete a minimum of 30 hours CPD per annum g) regardless of actual hours worked as an External Verifier.





APPENDIX 1F

NATIONALLY AGREED MAXIMUM SERVICE TIMES FOR **BEAUTY THERAPY AND SPA THERAPY NVQ/SVQ** ASSESSMENT PURPOSES

The 2010 revised National Occupational Standards (NOS) require that technical services are carried out 'in a commercially viable time'. To ensure consistent NVQ/SVQ assessment practices, Habia has developed a nationally agreed set of maximum service times for certain, critical services for each level of NVQ/SVQ. These times are shown below.

Note: Specialist treatments may require longer following manufacturers' instructions.

Range of Service Times for Level 1 Beauty Therapy

At Level 1, the requirement to work to a commercial time is limited to assisting with facial treatments, nail treatments and day make-up. The maximum service times quoted below have been developed for NVQ/SVQ assessment purposes.

Please note that the type, depth and breadth of services listed are those described in the Level 1 Beauty Therapy Standards only.

	Service (excluding consultation and preparation)	Minutes (Maximum)
1.	Assist with facial treatment	30
2.	Assist with nail treatment	30
3.	Assist with day make-up	30



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Range of Service Times for Level 2 Beauty Therapy

The maximum service times quoted below have been developed for NVQ/ SVQ assessment purposes.

Please note that the type, depth and breadth of services listed are those described in the Level 2 Beauty Therapy Standards only.

	Service	Minutes
	(excluding consultation and preparation)	(Maximum)
1.	Facial	60
2.	Day make-up	30
3.	Evening make-up	45
4.	Special occasion make-up (eg bridal)	45
5.	Basic manicure	45
6.	Basic pedicure	50
7.	Eyebrow wax	15
8.	Underarm wax	15
9.	Half leg wax	30
10.	Bikini line wax	15
11.	Full leg wax	45
12.	Upper lip wax	10
13.	Chin wax	10
14.	Eyebrow shape	15
15.	Eyebrow tint	10
16.	Eyelash tint	20
17.	Apply a full set of artificial lashes (flares)	20
18.	Apply a full set of artificial lashes (strips)	10
19.	Apply a partial set of artificial lashes (flares)	10
20.	Apply a partial set of artificial lashes (strips)	10
21.	Ear piercing	15
22.	Make-up lesson	75
23	Threading (eyebrow reshape)	20
24	Threading (upper lip)	10
25	Threading (chin)	10





Range of Service Times for Level 3 Beauty Therapy

Owing to the nature of many of the services in the Level 3 NVQ/SVQ, it is not possible to set a precise time for completion. Times for critical aspects of beauty therapy services are quoted below.

Please note that the type, depth and breadth of services listed are those described in the Level 3 Beauty Therapy Standards only.

	Service (excluding consultation and preparation)	Minutes (Maximum)
1.	Back massage	30
2.	Full body massage (excluding head and face)	60
3.	Full body massage (including head and face)	75
4.	Back massage using pre-blended aromatherapy oils	30
5.	Full body massage (excluding head and face) using pre-blended aromatherapy oils	60
6.	Full body massage (including head and face) using pre-blended aromatherapy oils	75
7.	Indian Head Massage	45
8.	Full body stone therapy treatment (including face)	<i>7</i> 5
9.	Hollywood wax	60
10.	Brazilian wax	45
11.	Shaping wax	45
12.	Intimate male wax	60
13.	Full face straight airbrush make-up	30
14.	A full set of single eyelash extensions	120
15.	Full body spray tan	30
16.	Full body manual self tan	60

Note: Standard service times have not been specified for the following treatments:

- Camouflage treatment
- Make-up design
- Epilation
- Body treatments
- Spa treatments
- Airbrush make-up design
- Facial electrical treatments

This is because service times will vary dramatically according to client needs, treatment requirements and service delivery.





Range of Service Times for Level 3 Spa Therapy

Owing to the nature of many of the services in the Level 3 NVQ/SVQ, it is not possible to set a precise time for completion. Times for critical aspects of spa therapy services are quoted below.

Please note that the type, depth and breadth of services listed are those described in the Level 3 Spa Therapy Standards only.

	Service (excluding consultation and preparation)	Minutes (Maximum)
1.	Body wrap treatment	60
2.	Body wrap treatment with flotation	90





APPENDIX 1G

SPECIAL REQUIREMENTS: INTIMATE WAXING

Owing to the nature of Units *B26* and *B27* and given the current Child Protection Legislation, it is required that both candidates and their clients MUST be 18 years of age and over.

It is also required candidates for these units already:

- hold a nationally recognised waxing qualification AND/OR
- at least sufficient commercial waxing experience

It is preferred that candidates meet both the above criteria.

